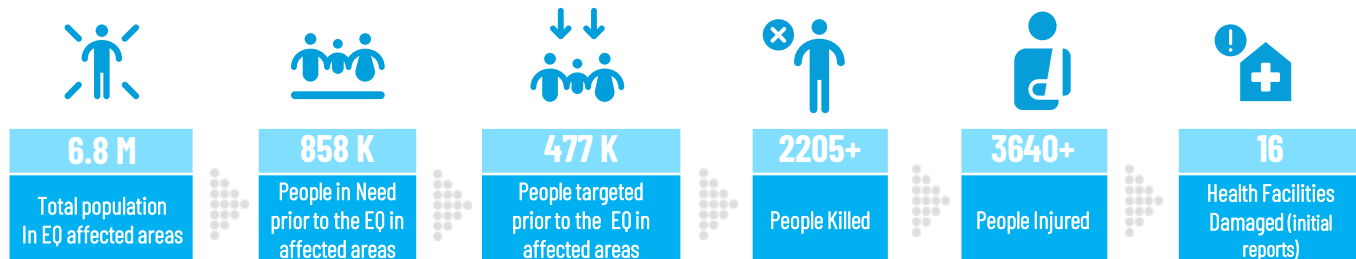


### Key Figures



### Key Highlights

A magnitude **M6.0 earthquake** struck eastern Afghanistan, at 11:48 PM (GMT +4.30) on 31 August 2025, with epicenter Kama in district, severely impacting communities across **Kunar, Laghman, Nangarhar, and Nuristan** provinces.

The earthquake occurred along the Kunar major fault line, the area historically categorized as high seismic risk with severe shake intensity levels. Preliminary reports indicate widespread destruction of homes, public infrastructure, and critical services, particularly in rural and mountainous areas where building structures are highly vulnerable to seismic shocks. Given the shallow depth and proximity to populated areas, the earthquake caused major structural damage and casualties are anticipated.

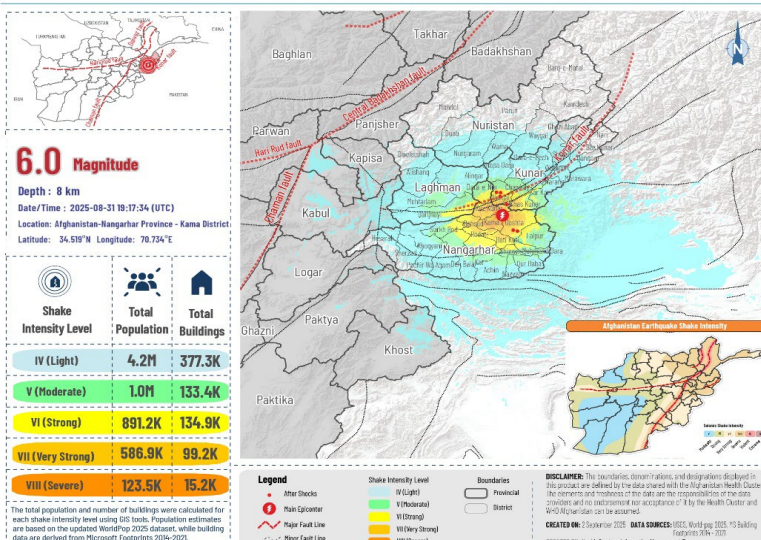
#### Preliminary reports on 4 September indicate:

- Over 2205 deaths
- Over 3,640 injuries, many in remote mountainous areas
- Over 6,700 homes destroyed
- 6.8 million people living in affected provinces
- 80 closed health facilities due to funding cuts recently
- Chawkay, Nurgal, and Dara-e-Nur districts** most impacted
- Also affected Alingar, Qarghayi, in Laghman Province; Behsud, Kama, Goshta districts in Nangarhar, Khas Kunar and Sarkani districts in Kunar province
- Health impact** on population significant including injuries in mountainous areas with challenges to access care
- Service disruption:** increased needs, fragile system requires surge support. Many health facilities in affected districts are reported to be operating, but further updates are awaited
- Access challenges** road closures, geographic constraints, and phone coverage



#### AFGHANISTAN

6.0 Magnitude Earthquake in Nangarhar Province – Kama District (31 August 2025)



Arit SHC Nurgal district support by UNICEF under HER completely destroyed in this earthquake.

### Immediate health needs

- ✓ **Access to essential services** – emergency primary health care, trauma care, MHPSS, maternal/newborn/childcare, delivery services, and referral strengthening, and rehabilitation of 16 damaged health facilities.
- ✓ **Disease surveillance & outbreak response** – including training, investigation, and prepositioning of medicines/supplies.
- ✓ **Health facility rehabilitation** – minor repairs and establishment of temporary/alternative health facilities in damaged or hard-to-reach areas.
- ✓ **Mobile health and Nutrition teams (MHNTs)** – deployment to serve affected populations in remote areas (currently 25 teams, more are planned).
- ✓ **Treatment of injuries & rehabilitation services** – partners already providing support.
- ✓ **Referral services** – provision of ambulances, drivers, referral hospitals support.
- ✓ **Human resources & medical kits** – provision of staff, IEHK kits, RMNCH kits, trauma kits, etc.
- ✓ **MHPSS & risk communication/community engagement** – integrated in response.
- ✓ **Strengthened coordination of the response.**

### Humanitarian context

Decades of war and internal conflict have left Afghanistan's health system fragmented and severely under-resourced. The involuntary return of refugees from neighboring countries, widespread displacement and multiple disease outbreaks have compounded these public health challenges, with over 22.9 million people requiring urgent support in 2025.

- **Health Cluster People in Need (PIN, HNRP 2025):** 14.2 million
- **Health Cluster People targeted for humanitarian health assistance (HNRP 2025):** 9.2 million
- **Funds requested (HNRP 2025):** 279 million USD and **received** 57.8 million USD
- **Total number of IDPs** 3.9M in 2024
- **Total number of returnees** 1.6M in 2025

### Health Facility Status

A total of 911 health facilities exist in Kunar, Nuristan, Nangarhar, Laghman and Nuristan provinces, including six specialized hospitals, two regional hospitals, six provincial hospitals and 25 district hospitals. Some health facilities are reportedly partially damaged but remain functional, continuing to provide healthcare services to affected populations. The exact number will be confirmed as assessments continue, **as of 31 August 2025, Health Cluster partners reported the closure of 80 health facilities in the eastern region (earthquake-affected provinces) due to recent U.S. government funding cuts, already impacting an estimated 563,600 people.**

There are four hospitals are currently serving as referral facilities for patients injured in the earthquake: Chawkey District Hospital in Kunar (25 beds), Asadabad Provincial Hospital in Kunar (150 beds), Kama District Hospital in Nangarhar (75 beds), and Nangarhar Regional Hospital in Jalalabad (623 beds).

Nangarhar Regional Hospital is providing specialized care for the most critical cases. A total of 548 patients are currently admitted, of whom 172 have undergone major surgical procedures. To date, 268 units of blood have been transfused to support critical patients, and 121 patients have been discharged. Many discharged individuals, however, have no homes to return to and remain within the hospital premises.

### Key activity updates from partners

#### WHO

WHO, with its strong presence in Afghanistan, is providing life-saving assistance to earthquake-affected communities.

- **6 MHNTs** in Kunar province have delivered over 1,100 consultations and referred 255 patients for further treatment.
- Mental health and psychosocial support are being prioritized, with three outreach teams providing over 200 consultations.
- Disease surveillance is ongoing through 17 surveillance support teams and 68 sentinel sites across four provinces, with no outbreaks detected to date.
- WHO has prepositioned outbreak kits for 3,000 cases and delivered **23 metric tonnes** of medical supplies to eight health facilities, while an additional 35.9 metric tonnes are being mobilized from Dubai

#### HEALTH Net TPO

- 5 teams deployed, including first access to Arit area in Nurgal district with medicines, supplies, and food.
- Essential medicines dispatched; coordination ongoing with partners for trauma kits and consumables. Relief items (blankets, tents, food, hygiene kits, fuel, etc.) delivered to Ghaziabad, Chalas, and Mamagul HSCs.
- 2,000 kits (including dignity and adolescent girls' kits) under preparation.
- 3 teams mobilized, focusing on women and children.
- In close collaboration with PPHDs, ANDMA, WHO, Health Cluster, authorities, and community leaders.

#### AYSO

- 4 Mobile Health Teams (MHTs) deployed
- 2 fully equipped ambulances
- 50 AYSO volunteers who are actively engaged in relief efforts.
- 1,000 packages of ready meals.
- involved with sub national clusters in assessment teams

#### IRC

- IRC ready to deploy 1 MHNT to Kunar
- 3 health teams in Nangarhar, 2 in Laghman in Nangarhar ready to be re-routed to EQ affected areas

#### UNPFA

- There are total 4 active MHNTs of UNPFA working in the earthquake area of Kunar province in which (3 MHNTs of IP MOVE & 1 MHT of IP ADDA)
- UNPFA delivered 26 sets of inter-agency reproductive health kits to Fatima-Zuhara provincial hospital, Kunar provincial hospital, and Nangarhar regional hospital.

#### AADA (UNPFA and UNICEF)

- Kunar: 1 ambulance with medical staff, medicines, and supplies deployed from the Laghman Project funded by UNPFA
- Another ambulance from the Kunar UNPFA funded Project, already present in the province trapped in Sawki district due to a rockfall. The team is on standby and prepared to proceed to the affected area as soon as access is restored.
- Nangarhar: 2 ambulances with medical staff, medicines, and supplies deployed from the Nangarhar UNPFA-funded project
- Nuristan: 2 ambulances deployed from the Nuristan HER AF Project office based in Jalalabad. UNICEF funded

#### MMRCA

- Supported by WHO, MMRCA implements the DATC project in Nangarhar,
- Deployed one team (doctors, nurses and a hospital manager) to Nangarhar regional hospital
- MMRCA can provide a team of psychosocial counselors for MHPSS in Nangarhar.

#### WADAN

- Nurgal, Mazar Dara, Kunar province deployed 9 experienced team members (Male and female doctors, Nurses, Health workers) equipped with essential medicines and supplies to provide immediate medical care

#### UNICEF Main Office

- dispatched medicine for up to 3,000 clients through their IPs in the south if additional needs arise.

#### JACK/UNICEF IP

- will deploy 2 ambulances and 10 health staff (5 male, 5 female) and medicines.

#### IOM

- To deploy 2 mobile health teams with ambulances and medicines.

#### SCI

- To deploy 2 teams with 8 health staff (male and female), medicines.

### INTERSOS

- will deploy 2 teams with 8 health staff (male and female) and sufficient medicines.

### OPHCD

- will provide 1 team with 4 health staff, 5 tents, and 2,000 pieces of soap.

### ARCS

- Will deploy 3 teams with 9 health staff and medicines.

### AHDS/WHO IP

- will provide trauma kits for emergency care.

### MEDAIR

- Reaffirmed readiness to support earthquake response in Kunar, Nangarhar, Laghman, and Nuristan provinces.
- Operational presence in Afghanistan with capacity to mobilize teams and resources in Health and Nutrition sectors.
- Prepared to deploy a Health and Nutrition mobile team in Kunar province.
- Actively engaged in joint assessments with IOM, Nutrition Cluster, WFP, and WASH Cluster in Nurgal district, Kunar.

### UNHCR

- requested to support with tents.

### MSF

- MSF teams on the ground donated trauma and dressing kits to Laghman Provincial Hospital and Nangarhar Regional Hospital.
- Surgical team reorganizing to support Nangarhar Teaching Hospital with technical assistance and additional kit donations.

### PU-AMI

- Will support HNTPO as Co-coordinator, with daily data collection and reporting to the Regional Health Cluster.

### Instant Aid

- will deploy 1 team with 5 health staff and medicines.

### TDH

- TDH is also present in 8 districts of Nangarhar province by covering 7 basic health center and 1 MHNTs.

### IRW

- IRW is also present in the earthquake affected areas and providing health services to affected people.

### Private Sector (a few hospitals)

- Will support with 4 ambulances, 13 medical staff, and sufficient medicines.

### Health Cluster

has requested all partners in the south region to remain on alert for potential deployment. A capacity assessment of partners will also be conducted.

## Key finding from Multi-Sectoral Rapid Assessment Form (MSRAF)

- ❑ 17 villages were visited and interviews conducted with key informants
- ❑ 17 villages comprised of 85,336 individuals of which 8,241 (9.7%) were reported to be affected by the earthquake ( 4446 female, 3795 male)
- ❑ Within this villages 932 deaths (477 female, 455 male) were reported ie. approximately 1% of the total population

### Findings on Health needs

- Trauma was most commonly reported health condition suffered by the population, mostly in 3 villages (suhel, Jabagi and Massod Ghazi).
- Psychological health conditions were also reported (and only reported) from these villages where high trauma caseloads were seen.
- Thus showing that unsurprisingly where there were high impact from the earthquake, also population is known to have suffered distress where mental health support is required.
- Other vulnerable groups such as pregnant women, infants, those who were chronically ill, living with severe disability and elderly were documented.

### Health service availability

- 17.6% (3) villages services reported different types of health care services had reduced / damaged
- Most commonly affected services were maternal and child health including deliveries, general OPD and primary health care, and inpatient care, followed by first aid, EPI and referral
- 17.6% (3) villages reported their health facilities were damaged
- Of these 33.3% (1) was supported by health cluster partners providing alternate service through mobile teams
- 66 (2) surge mobile clinics are where health facility is reported not to be damaged
- Mobile clinics tended to be within close range average 20mins by foot, 7.3 mins by car
- Whereas nearby health facilities which served as alternate where further, with an average of 42ms away by foot, 25 mins by car
- In the 17 villages 52% reported medicines were not available or inadequate
- In the 17 villages 53% reported medical supplies were not available or inadequate



### Captured photos from the earthquake affected areas and response



### Key information Sources

- Afghanistan Flash Update #2: Earthquake in Nangarhar Province - OCHA <https://reliefweb.int/node/4173514>
- Afghanistan: Flash Update - Earthquake in Eastern Afghanistan (Kunar, Nangarhar, Laghman) - IOM <https://reliefweb.int/node/4173758>
- Afghanistan Earthquake: WHO Situation report no. 3- WHO <https://reliefweb.int/node/4173759>
- Afghanistan Health Cluster Relief Web Response Website <https://afghanistan.healthcluster.org/>
- HerAMS AFG Report <https://herams.org/project/59>
- Public Health Situation Analysis (PHSA) on 2025/08/29 <https://reliefweb.int/report/afghanistan/public-health-situation-analysis-afghanistan-04-august-2025>

### Afghanistan Health Cluster Focal Points

#### Dr. Michael Lukwiya

Health Cluster Coordinator

Email: [lukwiyam@who.int](mailto:lukwiyam@who.int)

#### Dr. Mohammadullah Dauran

Health Cluster Support Coordinator

Email: [dauranm@who.int](mailto:dauranm@who.int)

#### Dr. Khan Mohammad Habib

Health Cluster Coordinator - Eastern Region (Nangarhar)

Email: [khabib@who.int](mailto:khabib@who.int)

#### Hassibullah Fakhri

Information Management Officer - Health Cluster

Email: [fakhrih@who.int](mailto:fakhrih@who.int)

### Global Health Cluster Support

Eba Al-muna Pasha Officer in Charge

Email: [pashae@who.int](mailto:pashae@who.int)

Luis Hernando Aguilar Senior IMO

Email: [aguilarl@who.int](mailto:aguilarl@who.int)

Antoni Ros Martinez IMO

Email: [anmartinez@who.int](mailto:anmartinez@who.int)